



Hawaiian Financial
Federal Credit Union

**ShareCard/Check Card
Request Form**

Yes, I would like a Hawaiian Financial FCU **ShareCard** to access my (please check one):

Share Draft Share

ACCOUNT NUMBER

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Yes, I would like a Hawaiian Financial FCU **Check Card** to access my:

Share Draft Share

ACCOUNT NUMBER

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PLEASE PRINT

NAME 1

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NAME 2

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Please issue the requested card(s) to each person signing this request for the account designated. Also, please send my Personal Identification Code which I need to access designated account(s). I have read and acknowledged receipt of the ShareCard and/or CheckCard Agreement which I received with this request. I AGREE NOT TO DISCLOSE OR OTHERWISE MAKE MY PERSONAL IDENTIFICATION CODE AVAILABLE TO ANYONE NOT AUTHORIZED TO SIGN ON MY ACCOUNT. Should any losses occur, due to my negligence, I accept full responsibility.

Signature: _____ Date: _____

Signature: _____ Date: _____